

Retail Food Inspection Report

Floyd County Health Department

Telephone (812) 948-4726

Establishment Name SUBWAY # 24446 (STATE)	Telephone Number Est 812-949-9050 Own (812) 949-9050	Date of Inspection 07/21/2021	ID#
Address 2441 STATE ST., NEW ALBANY IN 47150			
Owner ROHIT D. PATEL	Purpose <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	Follow Up	Released 07/30/2021
Owner's Address 2441 STATE ST. NEW ALBANY, IN 47150-		Menu Type 1 _ 2 <u>X</u> 3 _ 4 _ 5 _	
Person in Charge ROHIT PATEL			
Responsible Person's Email NAYOSHA@YAHOO.COM			
Certified Food Handler PURNA PATEL			

CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE COLUMN MARKED AS "R"

Section #	C	NC	R	Narrative	To Be Corrected
136	X		X	Observed employee drinks on food prep table.	CORRECTED
294	X			Observed sanitizing solution in sink and bucket to be 100ppm.	CORRECTED
218		X		Observed broken light shield in walkin cooler.	7/28/21

Summary of Violations C 2 NC 1 R 1

Received by (name and title printed):

ROHIT PATEL

Inspected by (name and title printed):

Christa Manus EHS

Received by (signature):

Inspected by (signature):

cc:

cc:

cc: